



# Amendment to a Masterfile

For Existing Licensees In ALECS

**Licensee:** \_\_\_\_\_  
(Enter your Entity Name as it currently appears on your OCCC license – this is not your DBA-assumed name)

**OCCC Masterfile:** \_\_\_\_\_ **Current Structure Type:** \_\_\_\_\_  
(The number before the dash on your license is your Masterfile)

**Contact Person:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Proposed Date of Change:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**Regulated Industry License:** \_\_\_\_\_

**Activations, Address Changes, DBA Name Changes, Entity Name Changes, Location Contact, Mailing Address, Surrenders, and other amendments must be filed in ALECS.**

**Change Requested:**

**New Entity Name:** \_\_\_\_\_

- This is not your DBA/assumed name
- If you are converting to a Sole Proprietor, enter your name as it appears on your SSN card.
- If you are converting to an LLC, Inc etc, enter the name as it appears on your TX SOS docs.

**New Entity Structure Type:** \_\_\_\_\_  
(If Sole Proprietor was selected, enter your SSN below – For all others enter the FEIN assigned by the IRS)

**SSN/FEIN:** \_\_\_\_\_

**The following must accompany this form and be mailed to:**

Licensing Department  
2601 N Lamar Blvd.  
Austin TX 78705

1. Texas Secretary of State Articles of Incorporation. This document is sometimes called a Certificate of Formation or Application for Registration. A Certificate of Filing is not acceptable.
2. IRS form CP-575 or 147 C
3. Copy of your current license (In ALECS go to Manage My Business > Print License)

If you are reverting from a one-member LLC, Corp, etc to a Sole Proprietor attach a copy of your SSN card.

Changes to an Entity's Federal Employee Identification Number require a transfer of license application.

\*\*\*\*\*The \$25 amendment fee will be collected at a later time\*\*\*\*\*

I am requesting that the OCCC process the amendment above to my Masterfile. I affirm that the information provided on this form is true and correct to the best of my knowledge.

\_\_\_\_\_

**Print & Sign Name****Title****Date**

The Office of Consumer Credit Commissioner obtains information from this form and certain third-party sources. With few exceptions, you may review and correct the information we collect. To find out more about the information we collect or to make an open records request, contact our Public Information Officer at 512-936-7639 or public.information@occc.texas.gov